

## Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	TOPICAL L-CARNITINE COMPOSITIONS
Attorney Docket Number::	05408/100M675-US1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	4
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

## Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Jacob
Family Name::	Guth
City of Residence::	Upper Black Eddy
State or Province of Residence::	PA
Country of Residence::	US
Street of mailing address::	1245 Friendship Lane
City of mailing address::	Upper Black Eddy
State or Province of mailing address::	PA
Postal or Zip Code of mailing address::	18972

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name:: Fred  
Family Name:: Czuczak  
City of Residence:: Dayton  
State or Province of Residence:: NJ  
Country of Residence:: US  
Street of mailing address:: 51 Stanley Avenue  
City of mailing address:: Dayton  
State or Province of mailing address:: NJ  
Postal or Zip Code of mailing address:: 08810

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Vickie  
Family Name:: Lentner  
City of Residence:: Hunterdon  
State or Province of Residence:: NJ  
Country of Residence:: US  
Street of mailing address:: 66 Park Avenue  
City of mailing address:: Washington  
State or Province of mailing address:: NJ  
Postal or Zip Code of mailing address:: 07882

#### **Correspondence Information**

Correspondence Customer Number:: 07278

#### **Representative Information**

Representative Customer Number:: 07278

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/458,822	03/28/03

**Assignee Information**

Assignee name:: Lonza Inc.  
Street of mailing address:: 17-17 Route 208  
City of mailing address:: Fair Lawn  
State or Province of mailing address:: NJ  
Postal or Zip Code of mailing address:: 07410